Domestic Violence and African American Women in Rural Communities

Sharon E. Williams, Ph.D., Florida Agricultural and Mechanical University, Tallahassee, Florida

Introduction

Domestic violence is a widespread social problem that affects families of every socioeconomic and demographic status. Women of all cultures, races, occupations, income levels, and ages are battered by boyfriends, husbands, lovers, and partners (Joseph, 1997). The Bureau of Justice projects that nationwide anywhere from four million to six million individuals (primarily women) are victimized annually. As few as 10% of all domestic violence crimes are ever reported, making the true measure of the problem statistically unknown (Bureau of Justice Statistics, 1995).

Data from the Family Violence Prevention Fund indicate that ninety-five percent (95%) of the victims of battering are women. Battering is the leading cause of injury to U.S. women, exceeding rapes, muggings, and auto accidents. Forty-two percent (42%) of women murdered are killed by their intimate male partners. For women ages 15-44, domestic violence is the leading cause of injury. Children living in the home where a mother is abused is also likely to be abused. Children who witness abuse are victims as well (Ammerman & Hersen, 1991). Women of all races are equally vulnerable to violence by an intimate partner (Bureau of Justice, 1995; U.S. Department of Health & Human Services, 1994). Women of color, particularly African American women living in rural and poor areas are one of the most vulnerable, yet undeserved populations (FCADV, 1999).

Overview of Domestic Violence and African American Women

A woman who belongs to a racial or ethnic minority group may feel that she is less likely to receive help than a white woman because of prejudice (Joseph, 1997; Marsh, 1993). Joseph (1997) in a study of wife battering among black and white couples, observed no difference in the rate, extent and nature of abuse experienced among the couples. However, a difference was observed in women's response to violence. African American women were more reluctant to seek services due to distrust of social service agencies. They tend to rely on informal networks of support. African American women may be reluctant to seek help because they don't believe anyone will help. African American women may have a partner who uses their common experiences with prejudice and understandable fear of prejudice to keep her under control. He may tell her that if she "has him arrested," he may be beaten or killed by the police

or he may ridicule her by saying "you are going to a bunch of white women for help." Additionally, she may be concerned about encountering prejudice from staff, volunteers, other battered women, and the judicial system (Edwards and Palmieri, 1999).

Marsh (1993) contends that African American women are subjected to sexual assault and domestic violence due to sexism and chauvinism. African American men are frustrated, feel powerless, experience economic instability, and vent their anger on defenseless spouses. For example, Kalichman, Williams, Cherry, Belcher and Nachimson (1998) examined sexual coercion, domestic violence and condom use among low-income African American women. They found that women who had been forced to engage in sex by male partners were more than likely not to request partners to use condoms to prevent HIV infection because such a request was likely to lead to physical violence. Marsh (1993) asserts that African American women have no protection and their appeals for help are ignored due to individual and institutional racism. Brice-Baker (1994) found that institutional racism and internalized racism serve as barriers to treatment for African American women, as well as lowering their self-esteem and contributing to women's acceptance of mistreatment.

Studies conducted on attitudes toward domestic violence and reporting (Locke and Richman, 1999; Pierce and Harris, 1993) suggest that there are variations in attitudes toward domestic violence relative to race and gender. Locke and Richman (1999) found that men relative to women are less sympathetic to victims. Differences were found between ethnic groups, with African American men and women sympathizing more with African American victims and Euro Americans sympathizing more with Euro American victims (Locke and Richman, 1999). Women sympathized more with victims, and people who have positive attitudes toward women in general tend to blame the abuser more than the victim (Pierce and Harris, 1993). Results indicate a need for consciousness raising about battering and consideration of the behavioral and attitudinal implications for reporting.

Studies indicate a strong correlation between attempted suicide and domestic violence, and an even stronger correlation for African American women (Filenaft & Stark, 1986; Heron, Twomey, Jacobs and Kaslow, 1997). Heron, Twomey, Jacobs and Kaslow (1997) examined the relationship between domestic violence and suicidal attempts for low-income African American women. They found an association between domestic violence and suicidal behavior. They suggest that suicide attempts are a coping behavior in response to stress caused by a domestic abuse situation compounded by high rates of poverty.

The Poverty Factor

While studies on the prevalence of domestic violence among the poor do not provide

national estimates of prevalence, and vary substantially in terms of methodology and the samples studied, these studies consistently indicate that a sizable proportion of welfare recipients have been or are victims of domestic violence. One study reviewed was specifically designed to provide a statewide prevalence estimate and was based on a representative sample of AFDC recipients in Massachusetts in 1996. This study found that almost 20% of welfare recipients surveyed had experienced domestic violence in the prior 12 months, and about 65% had been victims of domestic violence at some time in their lives (U.S. Department of Health, Education and Welfare, 1997).

Available studies on the prevalence of domestic violence among welfare recipients consistently indicate that a sizable proportion of welfare recipients have been or are victims of some type of abuse by an intimate partner. Although nationwide estimates are not available, relevant research studies exist that are based on smaller geographic areas or participants in particular programs. According to these studies, approximately 15 to 56 percent of the women surveyed reported that they were current victims or had been victims of domestic abuse in the 12 months preceding the survey. Between 55 and 65 percent of respondents reported that they had been physically abused by an intimate partner at some point in their lives. These estimates are higher than estimates of the prevalence of domestic violence among the general population. A 1998 nationally representative telephone survey of more than 8,000 women found that 1.5% reported having been physically abused by a partner in the 12 months preceding the survey, and 25% reported having been physically abused by an intimate partner at some point in their lifetime. However, surveys conducted by the U.S. Department of Justice show that, compared with women in general, women aged 20 to 34, divorced or separated women, and women with family incomes under $9,999 are more likely to be victims (Report to Congressional Committees, November 1998). African American women living in poverty are at a greater risk for abuse than the general population.

Overview of Domestic Violence in Rural Communities

Whether rural or urban, all communities experience similar barriers in trying to meet the needs of their citizens. They struggle to deal with mentally, physically, or emotionally challenged people; AIDS victims; homeless and impoverished people; substance abusers; and juvenile delinquents. Rural areas, however, have special problems in addressing these issues including a smaller population base to draw state and federal funding; fewer human, material, and financial resources from the community; and problems around transportation and physical isolation (FCADV, 1999; Ginsberg, 1998). Consequently, rural communities face unique challenges in meeting the plight of those confronting domestic violence.

Domestic violence victims find themselves in vulnerable positions, where existing

danger is intensified by physical isolation, lack of local services, transportation and weather issues. It is not uncommon for batterers to isolate victims by demanding no contact with family, friends, or even neighbors. In rural areas, this isolation can be magnified. There is no one next door who might hear the sounds of a beating and call for help. There is no public transportation. No one visits the home for any reason (FCADV, 1999).

A study conducted by the Florida Coalition Against Domestic Violence (1999) found that in rural counties the primary undeserved population is the African American community. In urban areas subtle racism tactics are often practiced. However, in rural areas, blatant racism tactics are commonly demonstrated. Discrimination in attitude or behavior based on race impacts rural battered African American women.

The intensity of rural racism compounds the difficulties of isolation faced by rural battered African American women. Their neighborhoods are small and their boundaries are well defined. Those who are victims of domestic and sexual violence in rural communities often see only white caseworkers, attorneys, police officers, judges, therapists, and volunteers. Any or all of these interveners may act out conscious or unconscious racism. As a result, African American women feel tremendous intimidation from within and out of their own communities. Often they do not report domestic or sexual violence. When they seek assistance, they are often treated differently from white women (FCADV, 1999).

Implications for Practice: Race, Gender and Rurality

Effective intervention with African American women living in rural communities that are victims of domestic violence requires that helping professionals apply a model of practice that is socially, culturally, racially, gender and spiritually sensitive (Heron et al., 1997, Iglehart & Becerra, 1995; Lum, 1996). The sociocultural model of practice as prescribed by Williams (1993) holds that practice with African American families should apply cultural and racial norms as points of reference in building and strengthening families, coupled with gender and spiritual considerations in working with African American women. Heron et al. (1997) and Dennis (1995) suggest that a culturally sensitive intervention ensures safety, increases coping skills and resource mobilization, and promotes developing supportive relationships in a manner that is consistent with each woman's cultural context.

Ginsberg (1993) holds that it is important that human service professionals learn the social and cultural context of rural communities by spending time in the community and should spend their earlier weeks of intervention visiting related agencies and becoming acquainted with professional peers. African American women are reluctant to seek services because of distrust of social services agencies. They tend to rely

on informal networks of support (Joseph, 1997). In reaching and serving the rural African American population, a good starting point is the local church. For years the church has served as the counseling house, worshiping house, learning center, and meeting place. Women are more accessible there than anywhere in the community. The practitioners need a friend or member of the church to serve as his or her liaison and access to the church community. Practitioners must develop sincere personal relations before they can hope to broaden their acquaintance in the African American community (FCADV, 1999).

Finally, needs assessment and research findings should be shared with community leaders, service providers, and policymakers so that they can engage in better program planning and be able to advocate effectively for services in their communities (Giachello, 1995).

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